2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # F03000006415

1. Entity Name
HSBC TECHNOLOGY & SERVICES (USA) INC.

Principal Place of Business	Mailing Address
1501 FEEHANVILLE DR MOUNT PROSPECT, IL 60056	2700 SANDERS RD TAX DEPT 25 PROSPECT HEIGHTS, IL 60070

DO NOT WRITE IN THIS SPACE

03282006 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0362763

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000504073
04/26/06-80057-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ARMISHAW, ANDREW C
STREET ADDRESS	2700 SANDERS RD
CITY-ST-ZIP	PROSPECT HEIGHTS, IL 60070
TITLE	DVP
NAME	LENZ, LIONEL
STREET ADDRESS	1501 FEEHANVILLE DR
CITY-ST-ZIP	MOUNT PROSPECT, IL 60056
TITLE	SVP
NAME	SHANK, ALLISON
STREET ADDRESS	2700 SANDERS RD
CITY-ST-ZIP	PROSPECT HEIGHTS, IL 60070
TITLE	AS
NAME	ANGELO, JOSEPH M
STREET ADDRESS	2700 SANDERS RD
CITY-ST-ZIP	PROSPECT HEIGHTS, IL 60070
TITLE	AS
NAME	LANKES, JOHN C
STREET ADDRESS	ONE HSBC CENTER
CITY-ST-ZIP	BUFFALO, NY 14203
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph M. Angelo Joseph M. Angelo 4/3/2006 847.564.6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #